

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE       |
|---------------------------|----------|--------|------------|
| FEE DETERMINATION         | WMA      |        | 7/3/00     |
| O.I.P.E. CLASSIFIER       |          |        | 10 7-12-00 |
| FORMALITY REVIEW          | A.S.     | 373    | 8-5-00     |
| RESPONSE FORMALITY REVIEW | SIC      | 809    | 3-12-01    |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet her

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